PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

OPP-1593-(15722/321019)

(Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			14				Γ	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		Ē	BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			Kf minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			2 minus 3 =		*			X42=		OR	X84=	
MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* f	the difference	in column 1 is	less than z	ero, enter	"0" in column 2		L	TOTAL	375	OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II							J	OTHER	
_		(Column 1) CLAIMS		(Colur		(Column 3)		SMALL		OR	SMALL	ENTITY
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* ENTATION OF M	Minus	***	CL AIAA	=		X42=		OR	X84=	
	TINO I PRESE	INTATION OF MI	ULTIPLE DE	PENDEN	CLAIM		, L	+140=		OR	+280=	
							L	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)		DDIT. FEE	<u> </u>		ADDIT. FEE	
		CLAIMS		HIGH	EST	Columno	1 6		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	DUSLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=	П	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	JLTIPLE DE	PENDENT	CLAIM		』 ├					·
								+140=		OR	+280=	
							Al	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)						
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=			X84=	
Ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM] -			OR	7.57-	
*	If the entry in colu	L	+140=		OR	+280=						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR TOTAL ADDIT. FEE												
		nber Previously Pa					er foun	d in the app	ropriate box	in co	lumn 1.	